South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Edgefield

Facility Type: Adult Day Care

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Administrator/Phone
Licensee

Licensed Unit

40

ADULT DAY CARE OF JOHNSTON

ADC-0283 / 04/30/2009

98 CALHOUN ST (HWY #23)

Edgefield / Corporation

JOHNSTON, SC 29832 PO BOX 290096

WILLIS, JOSEPH C PH#: 803-699-0293 COLUMBIA, SC 29229

Fac. Cont. Email:No Fac Cont. email on record JCW ADULT DAY CARE INC

Number of Participants 40

EDGEFIELD COUNTY ADULT DAY CARE CENTER ADC-0006 / 07/31/2009 30

15 CENTER SPRINGS RD Edgefield / Non-Profit Corporation

EDGEFIELD, SC 29824 PO BOX 510

GRIFFITH, JAMES R PH#: 803-637-5326 EDGEFIELD, SC 29824

Fac. Cont. Email: JRGRIFFITH@ECSCC.ORG EDGEFIELD COUNTY SENIOR CITIZENS COUNCIL

Number of Participants 30

Totals For Facility/License Type Adult Day Care

Number of Activities/Facilities licensed: 2 Number Licensed Units 70

Division of Health Licensing

County: Edgefield

Facility Type: Community Residential Care Facility

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ

Location City, State Mailing/Billing Addres

Administrator/Phone Licensee Licensed Unit

FOREST VIEW MANOR RETIREMENT CENTER CRC-0500 / 11/30/2009

141 CALLISON HWY Edgefield / Corporation

MCCORMICK, SC 29835 141 CALLISON HWY

NIXON, KENNETH M PH#: 803-637-5857 MCCORMICK, SC 29835 Fac. Cont. Email: KMNIXON62@AOL.COM HILLSIDE INC

Certifications:Alzheimer Care

Totals For Facility/License Type Community Residential Care Facility					
Number of Activities/Facilities lice	ensed:	1 Numbe	er Licensed Units	40	

2

South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Edgefield

Facility Type: Habilitation R15

Facility Name License Nbr/Expiration Date Location Street County/Ownership Typ Mailing/Billing Addres Location City, State Administrator/Phone Licensed Unit Licensee EDGEFIELD COMMUNITY RESIDENCE MR15-0139 / 07/31/2009 1305 HILLCREST DR Edgefield / State EDGEFIELD, SC 29824 PO BOX 4706 CUMMINGS, SONJA PH#: 803-637-5468 COLUMBIA, SC 29240-4706 Fac. Cont. Email:No Fac Cont. email on record SC DEPARTMENT OF DISABILITIES AND SPECIAL NEEDS

Totals For Facility/License Type Habilitation R15

Number of Activities/Facilities licensed: 1 Number Licensed Units 8

County: Edgefield

Facility Type: Hospital or Institutional General Infirmary

Facility Name
License Nbr/Expiration Date
Location Street
County/Ownership Typ
Location City, State
Mailing/Billing Addres

Administrator/Phone Licensee Licensed Unit

EDGEFIELD COUNTY HOSPITAL

300 RIDGE MEDICAL PLAZA

HTL-0479 / 03/31/2009 (Renewal Edgefield / County

EDGEFIELD, SC 29824 PO BOX 590

GREGORY, SAMUEL S PH#: 803-637-3174 EDGEFIELD, SC 29824

Fac. Cont. Email:RAY.PRICE@EDGEFIELDCOHOSPITAL.ORG EDGEFIELD COUNTY HOSPITAL

Licensed Beds: General: 25 Psychistric: 0 Rehab: 0 Substance Abuse 0

Other Beds NICU: 0 Neonatal Special Care 0

Certifications: Swing Bed Unit(s), JCAHO Accredited, Critical Access Hospital

Totals For Facility/License Type	Hospital or Institutional General In	firmary
Number of Activities/Facilities lice	nsed: 1 Number Licensed Units	25

April 2, 2009

South Carolina Department of Health & Environmental Control Division of Health Licensing

County: Edgefield

Facility Type: Nursing Home

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

TRINITY MISSION HEALTH & REHAB OF EDGEFIELD LLC

NCF-0941 / 07/31/2009 Edgefield / Ltd. Liability 120

226 WA REEL DR

EDGEFIELD, SC 29824

PO BOX 668

EDGEFIELD, SC 29824

FALLAW, DENISE PH#: 803-637-5312 Fac. Cont. Email:DFALLAW@TMEDGEFIELD.COM

TRINITY MISSION HEALTH & REHAB OF EDGEFIELD LLC

Licensed Beds Nursing Home 120

Institutional Nursing Home

Certifications: None

Totals For Facility/License Type Nursing Home

Number of Activities/Facilities licensed:

Number Licensed Units

County: Edgefield

Facility Type: Renal Dialysis

Facility Name Location Street Location City, State Administrator/Phone

License Nbr/Expiration Date County/Ownership Typ Mailing/Billing Addres Licensee

Licensed Unit

15

DCA OF EDGEFIELD ERD-0149 / 09/30/2009 306 MAIN ST

EDGEFIELD, SC 29824

CLARKE, SHARON M PH#: 803-637-3225

Fac. Cont. Email:SCLARKE@DIALYSISCORPORATION.COM

Edgefield / Ltd. Liability

214 SENATE AVE STE 300 CAMP HILL, PA 17011

DCA OF EDGEFIELD LLC

Licensed Stations: Hemodialysis: 15 Peritoneal: 0

Totals For Facility/License Type Renal Dialysis

Number of Activities/Facilities licensed:

Number Licensed Units

15

Number of Activities/Facilities licensed in county of Edgefield

Lics

7

Number Licensed Units:

278

Report Total

Total Number of Activities/Facilities licensed

7 Total Number Licensed Units